



Suicide prevention starts with everyday heroes like you. Money raised goes to critical research, education programs, advocacy, and support for those affected by suicide.

Join us to help create a culture that's smart about mental health.

Fort Bend Hike for Hope 2024 Sponsorship Opportunities

**April 13, 2024
Sugar Land Brazos River Park
www.afsp.org/fortbend**



**American
Foundation
for Suicide
Prevention**



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for Suicide
Prevention**

October 1, 2023

Dear Friend and Community Leader,

You can be an everyday hero in the fight against suicide.

Partner with us as an event sponsor for the 2024 Fort Bend Hike for Hope taking place on Saturday, April 13, 2024, at Sugar Land Brazos River Park, Fort Bend, Texas.

Why support the Fort Bend Hike for Hope?

Suicide is a leading cause of death – and it is preventable. With your support, we'll be one step closer to achieving our bold goal of reducing the suicide rate 20% by 2025.

Build your brand's goodwill by supporting a cause everyone can get behind.

- The 2023 Fort Bend Hike for Hope event had nearly 650 registered participants and we hope for an even bigger turnout this year.
- Our participants are passionate supporters of the cause, with 78% of online registrants indicating a personal investment in suicide prevention. And goodwill goes a long way: 91% of global consumers are likely to switch brands to one associated with a good cause, given comparable price and quality.
- Not only are consumers making purchase decisions with purpose top of mind, but they are also buying and advocating for purposeful brands. 72% of consumers would recommend a brand that supports a good cause over one that doesn't.
- As a sponsor you will show our community that you're a voice for suicide prevention.

The American Foundation for Suicide Prevention leads the fight against suicide.

Funds raised from The American Foundation for Suicide Prevention events allow us to fund research, create educational programs, advocate for public policy, and support survivors of suicide loss.

We look forward to discussing our 2023/2024 sponsorship opportunities and benefits with you in more detail. Together, we can #StopSuicide.

For more information, please contact:

Claudia Eubanks
2024 Fort Bend Hike for Hope
Sponsorship Chair
(281) 451-7359
fortbendafsp@gmail.com



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FORT BEND HIKE FOR HOPE SPONSORSHIP LEVELS

Lifesaver Level Sponsor | \$5000

- ☑ Prevention, Advocate, Support & Hope Level Sponsorship benefits listed below.
- ☑ 15 complimentary Hike for Hope t-shirts.
- ☑ Opportunity to provide a one-minute video of why you support the cause on Fort Bend Hike for Hope social media page(s).
- ☑ 90 days prior to the event – Your company's social media content or logo shared twice monthly.
- ☑ Your company's branding will be prominently displayed on our event social media pages.
- ☑ Your company logo prominently displayed on the stage banner. *Deadline for submission-March 15, 2024.
- ☑ Onstage introduction with opportunity to say a few words.
- ☑ Photobooth logo - Your company's logo will be digitally placed on official event day Photo Booth images which will be posted online for participants to review, download, and share on their social media.

Hope Level Sponsor | \$2500

- ☑ Prevention, Advocate, & Support Level Sponsorship benefits listed below.
- ☑ 8 complimentary Hike for Hope t-shirts.
- ☑ Opportunity to provide a 30 second video of why you support the cause on Fort Bend Hike for Hope social media page(s).
- ☑ 60 days prior to the event - Your company's content or logo shared once monthly on our event social media pages.
- ☑ Your company logo will be displayed on route signage.
- ☑ Your company logo on stage banner. *Deadline for submission-March 15, 2024.

Support Level Sponsor | Donate \$1000

- ☑ Prevention and Advocate Level Sponsorship benefits listed below.
- ☑ Your company recognized in announcements at event.
- ☑ 4 complimentary Hike for Hope t-shirts.
- ☑ Your company listed as sponsor in 2 mailings of Hike for Hope eNewsletter.
- ☑ 30 days prior to the event - Your company's social media content or logo shared once on our event social media pages.
- ☑ Event day signage listing your company as an event sponsor.

Advocate Level Sponsor | \$500

- ☑ Prevention Level Sponsorship benefits listed below.
- ☑ Your logo on the back of participant t-shirts. Hike For Hope 2023 had 642 Participants!
- ☑ 2 complimentary Hike for Hope t-shirts.
- ☑ Verbal recognition prior to the opening ceremony.
- ☑ Listing in Hike for Hope eNewsletter.

Prevention Level Sponsor | \$250

- ☑ The opportunity to support the nation's leading non-profit organization dedicated to understanding and preventing suicide through research, education, and advocacy, and to reaching out to people with mental disorders and those impacted by suicide.
- ☑ A tax-deductible donation & donation receipt.
- ☑ Reserved area to set up a promotional booth on event day.
- ☑ Your logo on the Hike for Hope website that links to your company's website.

***Must have logo and signed sponsorship agreement turned in by 3/15/24 to have logo on shirt/banner**



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FORT BEND HIKE FOR HOPE A LA CARTE SPONSORSHIP OPTIONS

These opportunities are great for small businesses wanting to contribute and participate. Please note that these “sponsorships” are standalone and do not include any benefits listed in the traditional sponsorship levels above.

▶ **Start/Finish Line Sponsor (limit 2) | \$500**

The focus of the entire event is the walk. Your company logo will be displayed prominently at the start/finish line to the Hike route for all walkers to see as well as on a start line ribbon which will be cut by the top earning team.

▶ **Volunteer Sponsor (limit 2) | \$500**

Volunteers receive a special volunteer T-shirt which will bear your logo. Your company logo will also be placed on a sign near the volunteer tent in plain view of volunteers and participants.

▶ **Top Team Sponsor (limit 3) | \$350**

This year, we will award the top fundraising teams a special treat or recognition award to show our appreciation for their hard work! Your company will sponsor this award and will be recognized as such.

▶ **Kids' Area Sponsor (limit 2) | \$200**

Face painting, bounce houses, and arts and crafts add to the joyful tone of the day for children and their parents attending the event. The Kids' Area was a popular area last year and your company logo will be placed on a sign near this station.

▶ **Route Sponsor (limit 3) | \$200**

New for the 2024 Fort Bend Hike for Hope, there will be 3 water bottle stations placed along the walk route. Route Sponsors will have representatives posted at each station to hand out water and cheer participants on along the route. You are welcome to distribute company marketing materials to the walk participants and your designated station will have a sign with your company's logo.

▶ **Booth/Table Opportunity | \$100**

Join us on Hike Day and secure an area for your group's tent, booth, or table. Use it as a team gathering spot or to promote and distribute your company's marketing material.





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FORT BEND HIKE FOR HOPE 2024 SPONSORSHIP AGREEMENT

Please Print

Name/Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____

Phone: _____ Email: _____

Company Website Address: _____

Please select your sponsorship options:

Cash Sponsorship:

- ☐ Prevention Level Sponsor | \$250
- ☐ Advocate Level Sponsor | \$500
- ☐ Support Level Sponsor | \$1000
- ☐ Hope Level Sponsor | \$2500
- ☐ Lifesaver Level Sponsor | \$5000

In-Kind Sponsorship:

Product: _____

OR Service: _____

Fair market Value* (product or service): \$ _____

Value Determined by: _____

**min*

A la Carte Sponsorship:

- ☐ Start/Finish Line Sponsor (limit 2) | \$500
- ☐ Volunteer Sponsor (limit 2) | \$500
- ☐ Top Team Sponsor (limit 3) | \$350
- ☐ Kid's Area Sponsor (limit 2) | \$200
- ☐ Route Sponsor (limit 3) | \$200
- ☐ Booth/Table Opportunity | \$100

Additional Options:

- ☐ Call me, I am interested in forming a team for the event
- ☐ Unable to sponsor, but please accept this donation \$ _____
- ☐ Referred by (if someone referred you to us, please let us know): _____

We authorize The American Foundation for Suicide Prevention to include our corporate name and logo on all event materials consistent with our sponsorship selection and publication dates.

Authorized Signature: _____ Date: _____

Donation Via:

- ☐ Enclosed Check (Make checks payable to American Foundation for Suicide Prevention or AFSP)
- ☐ Invoice Required to Process Payment
- ☐ Credit Card, secure credit card payments can be made at www.afsp.org/walksponsors

Completed & Signed Agreement with Logo Due by **March 15, 2024**

Logo Specifications:

- **T-shirt:** Vector file (EPS, PS, PDF) format to ensure logo integrity.
- **Website:** Stacked logos appear best (max width is 80px) and we accept vector files and/or image files (.jpeg, .png).

Please scan and **email** this agreement, logo, & Website link to:

Email: fortbendafsp@gmail.com

Thank You for Your Generous Support of the American Foundation for Suicide Prevention.



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OFFLINE DONATION FORM

This printable form is available for supporters who would like to donate to a participant offline via check, money order, or credit card. If you are an organization interested in sponsoring an event, please contact the Event Chair for an event Sponsor Form.

My contribution is supporting _____
Participant's First & Last Name

in the: _____
Fort Bend Hike for Hope – Sugar Land, Texas
Event Name & Location (CITY/STATE)

Donation Amount \$ _____

Please Make Checks Payable to American Foundation for Suicide Prevention (AFSP)

(Please do not staple or tape checks to this form)

Donor Name (FIRST & LAST) _____

Street Address _____

City _____ State _____ Zip _____

E-mail* _____

Home phone _____ Work Phone _____

Donation Via:

☐ Enclosed Check (Make checks payable to American Foundation for Suicide Prevention or AFSP)

☐ Invoice Required to Process Payment

☐ Credit Card

- Secure credit card payments can be made at www.afsp.org/walksponsors

Signature _____

An electronic receipt is automatically generated for **all donations and sent to the email address provided. The IRS will accept a canceled check as a receipt for all donations under \$250. Donations of \$250 and above will receive a written acknowledgment to the address provided.*

Thank You for Your Contribution

Mail this form and your check (please do not send cash) to:

American Foundation for Suicide Prevention (AFSP)

Attn: Data Entry

199 Water St, 11th FL

New York, NY 10038

Due to the high volume of donations AFSP receives both in the mail and on the day of the events, please allow 2-3 weeks from the date that the donation is received to post to your account. If you do not see your donation within this time frame, please email development@afsp.org.



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IN-KIND GIFT CONFIRMATION

PLEASE PROVIDE THE FOLLOWING INFORMATION:

Event Supporting (City, State): Fort Bend Hike For Hope – Texas

Product Description _____

Fair Market Value (\$ amount/product amount) _____

Value Determined By _____

Donor Company _____

Donor Address _____

City _____ State _____ Zip _____

Phone () _____ Fax () _____ Email _____

Contact Person _____

Title _____

I, _____, certify that to the best of my knowledge, the information above is true, correct, and complete.

Authorized Signature _____ Date _____

PLEASE FAX, MAIL, or EMAIL THIS AGREEMENT TO:

The American Foundation for Suicide Prevention

199 Water St, 11th FL

New York, NY 10038

Phone: 888-333-AFSP (2377) * Fax: 212-363-6237 * Email: development@afsp.org

IRS/Tax Deduction Information:

AFSP will furnish the donor with an acknowledgment letter after the delivery and/or provision of the in-kind gift. This receipt can reflect a dollar value for the in-kind gift as communicated to AFSP by the donor using this form. Any transfer documentation that will help to describe and evaluate the gift in-kind will be appreciated. The donor assumes all other responsibilities relating to the tax deductibility of this contribution. The donor should consult professional advisors regarding any tax reporting requirements.

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
American Foundation for Suicide Prevention

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.
☐ Individual/sole proprietor or single-member LLC
☒ C Corporation
☐ S Corporation
☐ Partnership
☐ Trust/estate
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____
Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.
☐ Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any) **1**
Exemption from FATCA reporting code (if any) _____
Applies to accounts maintained outside the U.S.

5 Address (number, street, and apt. or suite no.) See instructions.
199 Water Street, 11th Floor

6 City, state, and ZIP code
New York, NY 10038

7 List account number(s) here (optional)

8 Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number
[] [] [] - [] [] - [] [] [] []
or
Employer identification number
1 3 - 3 3 9 3 3 2 9

Part II Certification

Under penalties of perjury, I certify that:

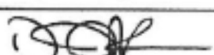
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and

2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and

3. I am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here
Signature of U.S. person ▶ 
Date ▶ **4/12/2021**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What Is backup withholding*, later.